



9-12-05

IFCU

Docket No.: 20193/0200949-US0
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Astrid Elbe et al.

Application No.: 10/789,462

Confirmation No.: 5168

Filed: February 26, 2004

Art Unit: 2193

For: **METHOD AND APPARATUS FOR
MODULAR MULTIPLICATION**

Examiner: D. H. Malzahn

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated June 10, 2005, please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.



Application No. (if known): 10/789,462

Attorney Docket No.: 20193/0200949-US0

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on September 9, 2005
Date

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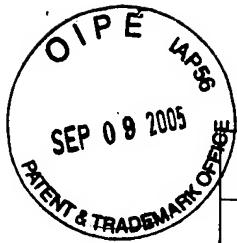
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Amendment in Response to Non-Final Office Action (8 pages)
Amendment Transmittal (1 page)
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AMENDMENT TRANSMITTAL LETTER				Docket No. 20193/0200949-US0
Application No.	Filing Date	Examiner	Art Unit	
10/789,462-Conf. #5168	February 26, 2004	D. H. Malzahn		2193
Applicant(s): Astrid Elbe et al.				
Invention: METHOD AND APPARATUS FOR MODULAR MULTIPLICATION				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	11	- 20 =		x
Independent Claims	2	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity				
<input type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
Dated: <u>September 9, 2005</u>				
Laura C. Brutman Attorney Reg. No.: 38,395				
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